



Alabama Behavior Analyst Licensing Board Application for Licensure

v. September 26, 2019

Type or block print only.

1. License Type

Select the type of license for which you are applying.

- | | |
|---|---|
| <input type="checkbox"/> Licensed Behavior Analyst | <input type="checkbox"/> Licensed Assistant Behavior Analyst |
| <input type="checkbox"/> <i>Renewal</i> : Licensed Behavior Analyst | <input type="checkbox"/> <i>Renewal</i> : Licensed Assistant Behavior Analyst |
| <input type="checkbox"/> <i>Temporary</i> : Licensed Behavior Analyst | <input type="checkbox"/> <i>Temporary</i> : Licensed Assistant Behavior Analyst |
| <input type="checkbox"/> <i>Reciprocity</i> : Licensed Behavior Analyst | <input type="checkbox"/> <i>Reciprocity</i> : Licensed Assistant Behavior Analyst |

2. Name(s)

This is the name that will be printed on your license and reported to those who inquire about your license. Do not use nicknames, etc.

Note: It is your responsibility to notify the Board of name changes.

First Name

Middle Name

Last Name

Suffix (i.e., Jr. Sr., II)

Maiden Name, if applicable

Name(s) under which originally licensed in another state, if different from above (First, Middle, Last)

3. Social Security Number

U.S. Social Security Number

4. Gender

☐ Female ☐ Male

5. Date of Birth

____ / ____ / ____
MM DD YYYY

6. Contact Info

Name, city, state, & email will be shared in the online licensee roster.

Opt out here: ____

Note: It is your responsibility to notify the Board of any changes.

Address

Address 2, if applicable

____ City ____ State ____ Zip Code

____ Phone Number ____ Email Address

7. Mailing Address

☐ Same as above

Address

Address 2, if applicable

____ City ____ State ____ Zip Code

8. BACB Certification	<div style="display: flex; justify-content: space-between;"> <div>_____</div> <div>_____</div> </div> <div style="display: flex; justify-content: space-between;"> <div>BACB Certificant Number</div> <div>BACB Certification Held</div> </div>
9. Other State License(s) Note: Submit a License Verification Form for each state listed, except AL.	Have you ever held a license in behavior analysis? <input type="checkbox"/> No <input type="checkbox"/> Yes, provide details below List all states* in which you are now, or have ever been, licensed to practice behavior analysis. <div style="display: flex; justify-content: space-between;"> <div>State: _____ _____ <input type="checkbox"/> Active <input type="checkbox"/> Inactive</div> <div>State: _____ _____ <input type="checkbox"/> Active <input type="checkbox"/> Inactive</div> </div> <div style="display: flex; justify-content: space-between;"> <div>_____ <input type="checkbox"/> Active <input type="checkbox"/> Inactive</div> <div>_____ <input type="checkbox"/> Active <input type="checkbox"/> Inactive</div> </div> <p>* Use a separate sheet of paper to list additional state licenses, if necessary.</p>
10. Qualifying Education Provide information about the school(s) you attended that qualifies you for licensure. Use a separate sheet of paper to list additional schools, if necessary.	<div style="display: flex; justify-content: space-between;"> <div>University/College _____</div> <div>City _____</div> <div>State _____</div> </div> <div style="display: flex; justify-content: space-between;"> <div>Department _____</div> <div>Degree earned _____</div> </div> <div style="display: flex; justify-content: space-between;"> <div>Graduation date (MM/YY): _____</div> <div>BACB coursework completed here? <input type="checkbox"/> No <input type="checkbox"/> Yes</div> </div> <div style="display: flex; justify-content: space-between;"> <div>Second University/College, if applicable _____</div> <div>City _____</div> <div>State _____</div> </div> <div style="display: flex; justify-content: space-between;"> <div>Department _____</div> <div>Degree earned _____</div> </div> <div style="display: flex; justify-content: space-between;"> <div>Graduation date (MM/YY): _____</div> <div>BACB coursework completed here? <input type="checkbox"/> No <input type="checkbox"/> Yes</div> </div>
11. Criminal Convictions	Have you ever been convicted of a criminal violation, plead Nolo Contendere, or entered a plea bargain to any federal, state, or local statute, or are any formal charges pending? <input type="checkbox"/> No <input type="checkbox"/> Yes, attach details on a separate sheet of paper
12. Disciplinary Actions *Use a separate sheet of paper to list additional disciplinary actions, if necessary.	A. Has any health professional license, certificate, registration, or permit you hold or have held been disciplined or are any formal charges pending? <input type="checkbox"/> No <input type="checkbox"/> Yes, provide details below* B. Have you ever been denied a license, certificate, registration, or permit in any state? <input type="checkbox"/> No <input type="checkbox"/> Yes, provide details below* <div style="display: flex; justify-content: space-between;"> <div>Date _____</div> <div>Location _____</div> <div>Explanation of the matter _____</div> </div> <div style="display: flex; justify-content: space-between;"> <div>_____</div> <div>_____</div> <div>_____</div> </div>
13. Criminal Background Check* *First-time applicants ONLY. Not required for renewals.	Submit the following directly to the ALEA Criminal Records & Identification Unit: <input type="checkbox"/> ALEA Application to Review Alabama Criminal History Record Information <input type="checkbox"/> A copy of a valid photo identification, see instructions list for options <input type="checkbox"/> Fingerprints on FBI Applicant cards, see instructions for detailed requirements <p style="text-align: center;">**Make copies of the above documents to include in your Application for Licensure**</p> <input type="checkbox"/> \$25.00 money order or cashier's check payable to "ALEA Criminal Records and Identification Unit"
14. Other Required Forms & Fees	All applicants: <input type="checkbox"/> \$25 Application Review Fee (see Application Instructions for important info regarding payments) <input type="checkbox"/> Applicable Licensure Fee (see list of fees below on p. 3) <input type="checkbox"/> If applicable, License Verification Form(s) for question #9 <input type="checkbox"/> If applicable, separate sheets required to answer questions #9-12 In addition, for first-time applicants ONLY: <input type="checkbox"/> Photocopies of ALEA application, ID, and fingerprints In addition, for applicants for "assistant" licenses ONLY: <input type="checkbox"/> Proof of Supervision Form

15. Applicant Affidavit

Must be signed in the presence of a notary.

I, _____, understand that the Board has the final decision and authority with reference to this application. I also understand that any false or misleading information in connection with this application may be cause for rejection of the application, revocation of the license, and/or legal action for such fraudulent information.

State of _____ County

The undersigned swears/affirms that he/she is the person who executed this application; that the statements contained herein are true in every respect; that he/she has not suppressed any information that might affect this application; that he/she will conform to the professional and ethical compliance code for behavior analysts; and that he/she has read and understands this affidavit.

Applicant's Signature

Date signed

Sworn before me this _____ day of _____, 20____.

Notary's Signature

My Commission Expires

Application Checklists:

To be sent to AL Behavior Analyst Licensing Board, P.O. Box 168, Mathews, AL 36052 (do **NOT** require a signature):

- ☐ Completed, notarized ABALB Application for Licensure
- ☐ \$25 Application Review fee and Licensure fee on separate checks or money orders made payable to "Alabama Behavior Analyst Licensing Board" (see Application Instructions for important info regarding payments):
 - ☐ Licensed Behavior Analyst.....\$150
 - ☐ Renewal Licensed Behavior Analyst.....\$150
 - ☐ Temporary Licensed Behavior Analyst.....\$100
 - ☐ Reciprocity: Licensed Behavior Analyst.....\$150
 - Assistant options:
 - ☐ Licensed Assistant Behavior Analyst.....\$100
 - ☐ Renewal Licensed Assistant Behavior Analyst.....\$100
 - ☐ Temporary Licensed Assistant Behavior Analyst.....\$100
 - ☐ Reciprocity: Licensed Assistant Behavior Analyst...\$100
 - Other options:
 - ☐ Late Fee.....\$50
 - ☐ Licensure reinstatement fee.....\$100
 - ☐ Fee for duplicate copy of license or certificate.....\$15
- ☐ If applicable, separate 8½ x 11 pages to complete answers to questions #9 through #12 For
- ☐ assistant-level applicants ONLY: Proof of Supervision Form
- ☐ For first-time applicants ONLY: *Photocopies* of ALEA application, ID, and fingerprints

For applicants licensed in another state, to be sent to the licensing board in the applicable states:

- ☐ License Verification Form(s) (the licensing board in the applicable states will mail our Board the completed verification)

To be sent to ALEA Criminal Records & Identification Unit, Attn: Background Checks, P.O. Box 1511, Montgomery, AL 36102-1511:

- ☐ ALEA Application to Review Alabama Criminal History Record Information
- ☐ One photocopy of a valid photo identification, see instructions list for options
- ☐ Set of fingerprints, see instructions for detailed requirements
- ☐ \$25.00 money order or cashier's check payable to "ALEA Criminal Records and Identification Unit"